

MEETING TITLE: Vaccine Advisory Committee (VAC) Quarterly Meeting

DATE: April 27, 2006

Attendees:

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| Sofia Aragon | Department of Health (DOH) Assistant Secretary's Office |
| Janna Bardi | DOH Immunization Program CHILD Profile Manager |
| Vicki Bouvier | DOH Immunization Program CHILD Profile |
| Carolyn Coyne | Washington State Health & Recovery Services Administration |
| Vikki Davis | Washington State Association of Local Public Health Officers (WSALPHO) |
| Chas DeBolt | Public Health Seattle and King County (PHSKC) |
| Jeff Duchin | PHSKC |
| Jay Fathi | Washington Academy of Family Practice (WAFP) |
| Nancy Fisher | Medical Director, Health Care Authority |
| Maxine Hayes | DOH State Health Officer |
| Patty Hayes | DOH Assistant Secretary, Community and Family Health |
| Jan Hicks-Thomson | DOH Immunization Program CHILD Profile |
| Carrie Horwitch | ACP/WSMA |
| Lisa Jackson | Group Health Cooperative |
| Larry Jecha | Washington State Association of Local Public Health Officers (WSALPHO) |
| Neil Kaneshiro | Washington Chapter, American Academy of Pediatrics (AAP) |
| Donna Larsen | Public Health Nursing Director, Snohomish Health District |
| Ed Marcuse | Consultant |
| Zach Miller | Consultant |
| Riley Peters | DOH Assessment |
| Ed Steinweg | Consultant |
| Lin Watson | DOH Immunization Program CHILD Profile |

Facilitator:

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| Maxine Hayes | DOH Assistant Secretary, Community and Family Health |
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Recorder:

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| Claire Norby | DOH Immunization Program CHILD Profile |
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| Agenda Items | Discussion/Recommendations | Decisions Made/Follow-Up Completed |
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| <p>I. Welcome and Introductions, Changes to Agenda</p> <p>Maxine Hayes</p> | <p>State Health Officer, Maxine Hayes, welcomed meeting attendees, visitors, and new VAC members. She thanked members for taking time out of their busy schedules to serve on the VAC. She reminded VAC members that they serve in an advisory capacity. As a VAC she believes that in the future, the VAC should make time to talk about an adult vaccine policy. She said that there may be many issues brought to the VAC that may have to be limited or rejected because the VAC cannot take on everything. She said that on a future agenda she would like to talk about how to manage things that we don't have funding for, but want to make a statement about.</p> <p>New VAC Members:</p> <ul style="list-style-type: none"> • Carrie Horowitch, Virginia Mason Medical Center • Nancy Fisher, Medical Director, Health Care Authority <p>Visitors included:</p> <ul style="list-style-type: none"> • Betsy Hubbard, PHSKC • Ann Simons, Wyeth • Cynthia Shurtleff, Immunization Action Coalition of Washington • Steven Frawley, Sanofi Pasteur • Adrienne Vahlsing, Sanofi Pasteur • Rachel Knowlton, Sanofi Pasteur • Wayne Garrison?, Sanofi Pasteur • Scott Burns, Merck Vaccines • Trent Taylor, Merck Vaccines • Debbie Oxford, Merck Vaccines • Larry Barge, GlaxoSmithKline • Bobbi Jo Drum, GlaxoSmithKline <p>Paul Nielsen, MedImmune</p> | |

| Agenda Items | Discussion/Recommendations | Decisions Made/Follow-Up Completed |
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| II. Conflict of Interest Policy | <p>The Conflict of Interest Policy was read by Janna Bardi. Lisa Jackson reported receiving research funding from Sanofi-Pasteur.</p> <p>Handouts: Washington State VAC Conflict of Interest Policy, 1/12/06</p> | |
| III. Action Items from the January 2006 meeting <ul style="list-style-type: none"> Meeting minutes approval for October 2005 Meeting minutes approval for January 2006 <p>Maxine Hayes</p> | <p>Maxine Hayes stated that time will be given on a future agenda to discuss adult immunization policy. She also reiterated that the VAC is advisory to the State Health Officer and reminded members of the specific scope, capacity, and limits of the group. She suggested bringing items that cannot be addressed by the VAC and IPCP to the Local Health Officer's group.</p> <p>The minutes will reflect high points and recommendations, but not all comments from the VAC meeting. The goal of DOH is to get the minutes out in two weeks.</p> <p>Handouts: VAC October 2005 Meeting Minutes VAC January 2006 Meeting Minutes</p> | <p><i>It was moved, seconded and carried that the minutes from the October 2005 and the January 2006 meetings be approved.</i></p> |
| IV. Membership Update <ul style="list-style-type: none"> Report on new member recruitment Addition of Naturopath seat <p>Maxine Hayes</p> | <p>Gannady Raskin, MD, ND will be joining the VAC in July to fill the Naturopath position on the VAC. A request has been made to AAP for an additional pediatrician to fill an AAP vacant position on the VAC.</p> <p>Handouts: VAC Membership Policy, 1/12/06 VAC Purpose Statement, 1/12/06 VAC Member Roster, 4/06</p> | |

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| <p>V. Report on Legislative Session</p> <ul style="list-style-type: none"> • Supplemental request • Combination vaccine proviso discussion <p>Maxine Hayes</p> | <p>Sofia Aragon reported on three bills related to immunizations that were passed by the Legislature and signed into law by the Governor.</p> <ul style="list-style-type: none"> • SHB 2985 creates a foster care health unit in the Department of Social and Health Services. • E2SHB 3098 transfers duties of the reconstituted State Board of Education. • ESSB 5305 prohibits vaccinating pregnant women and children under three years of age with mercury-containing vaccines. <p>Senator Cody has asked DOH to meet with AAP on 5/12/06 regarding ESSB 5305 to clarify some points of the bill including possible ways to implement the emergency clause. The bill will take effect July 1, 2007. Two flu vaccines are available from Sanofi-Pasteur and Chiron that meet the mercury limits defined by this bill.</p> <p>Comments from Committee members regarding ESSB 5305:</p> <ul style="list-style-type: none"> • Concern was raised that the bill corroborates the perception that thimerosal is detrimental to health. • Unsure that communities are aware of the bill. • The consequences of refusing to comply with the statute have not been spelled out. • Many advocacy members were not aware of the bill. • Knowing immunization rates among pregnant women in Washington State is necessary to know the impact of the bill • Many providers are not aware of the bill. • It will not be effective until July 1, 2007, so there is time to educate providers. • It would be good for DOH to educate on other issues also, i.e., the new HPV vaccine. • There are 2000 providers in Washington State | |
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| | <p>and about a third are practicing obstetricians. It's important to get the information out to them.</p> <p>Maxine Hayes noted that this topic will be on the VAC agenda for a few years. She said that this is a formidable challenge that we will continue to have.</p> <p>Janna Bardi reported that the 2005-2007 Biennium Supplemental Budget includes \$3,919,000 for the Immunization Program CHILD Profile section. Within the budget, 250,000 additional doses of vaccine will be purchased to meet new state requirements and federal recommendations for varicella, hepatitis A, meningococcal, and tetanus diphtheria acellular pertussis (Tdap) vaccines. The vaccines will be available to local health jurisdictions on July 1, 2006.</p> <p>Carolyn Coyne described that the criteria used by HRSA to provide meningococcal vaccine to Medicaid clients until July 1st are based on the current VAC shortage recommendation and consistent with ACIP.</p> <p>DOH also received a specific allocation for purchasing some of the newer combination vaccines with requirements regarding the process to determine which combination vaccines the agency will purchase. She said that DOH will bring clinical and cost-effectiveness information on these newer combination vaccines to the July VAC meeting with the intention of purchasing vaccine in October 2006. This will coincide with the beginning of the federal fiscal year and implementation of the Vaccine Management Business Improvement Project (VMBIP) on October 2, 2006. It is hoped that a VAC recommendation will be made at the July VAC meeting.</p> <p>Handouts:</p> <ul style="list-style-type: none"> • 2006 Legislative Session Summary • 2006 Supplemental Budget (ESSB 6386) | |
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| | <ul style="list-style-type: none"> • Decision-Making Flow For Addition of New Vaccines, 4/26/06 • Previous VAC Recommendation For Use of Combination Vaccines | |
| VI. Preparation for Universal Vaccine System Examination Discussion in July Janna Bardi | <p>Information was shared about the challenges of making new vaccines available in our current system and DOH is experiencing more urgent demand for new vaccines for many reasons. There is increased transparency with CDC concerning ACIP recommendations. Parents and providers are much more aware of changes. Legislative action regarding requirements to educate about meningococcal disease is an example of this change.</p> <p>It can take as long as 18 months to implement the purchase of vaccine after it has become available on the CDC contract. Because Washington State does not use point-of-service screening, VFC can not be implemented until universal funding is in place. DOH has been engaged in policy discussions with the Office of Financial Management, Legislature, and HRSA (formerly MAA) regarding how the system can be changed to address environmental changes. There will be a fuller discussion of the issue at the July 13th VAC meeting. Michael Washington, CDC, has been invited to be at the meeting to explain the new system and cost out the potential changes.</p> <p>Indian Health Services contacted DOH about the issue of not being able to get Menactra and Tdap. Native Americans are VFC eligible and tribal clinics only serve Native Americans. DOH will distribute one shipment to each tribal clinic for use prior to statewide implementation of these vaccines July 1, 2006.</p> <p>Comments from Committee Members:</p> <ul style="list-style-type: none"> • The cost of vaccine is very visible, but the cost of the disease is invisible. It would be good to give examples. | <i>Janna Bardi will provide information for the universal system discussion prior to the meeting in July.</i> |

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| | <ul style="list-style-type: none"> • This timing issue has been a problem for a long time. It's a good idea to do this work. • Do insured children qualify for VFC? | <i>Lin Watson will provide information about whether insured children qualify for VFC to the VAC via the listserv.</i> |
| <p>VI. Action Item: VAC Rotavirus Recommendation</p> <ul style="list-style-type: none"> • Presentation • ACIP Recommendation • Discussion • Plan to make recommendation at July 13 VAC meeting <p>Maxine Hayes</p> | <p>Chas Debolt, Vaccine-Preventable Disease Epidemiologist at DOH, gave a presentation on the new rotavirus vaccine (PRV). The vaccine is administered orally and infants can be immunized at six weeks of age if they are clinically stable. All three doses should be administered before 32 weeks of age.</p> <p>There may be more detailed information about the rotavirus vaccine in the ACIP recommendation when it becomes available. Because it is an oral vaccine, it may be easier to give along with other injectable vaccines.</p> <p>State funding will not be available until July 2007. CDC has made the vaccine available for 50% of the birth cohort on the contract prior to release of the ACIP recommendation. We don't know why only 50% was used for the contract.</p> <p>Maxine Hayes said that it is hoped that the VAC will make a recommendation for the rotavirus vaccine at the July 13th VAC meeting.</p> <p>Comments from Committee Members:</p> <ul style="list-style-type: none"> • Do we have Washington specific data? • Not all children with diarrhea are tested. • Children's or Mary Bridge might be a good place to get data. • CHARS data shows hospitalization for gastro-intestinal illness. It's generally accepted that about 50% of children admitted to hospitals for diarrhea have rotavirus. • The data can change seasonally. This seasonality is consistent throughout the country so there is no need to get Washington-specific data. | <p><i>Lin Watson will send cost/benefit information from the CDC conference she attended to VAC members via the VAC ListServ.</i></p> <p><i>Patty Hayes asked Riley Peters and Chas Debolt to look at the CHARS data, knowing the data will not show how many parents lost hours from being off work. The information will be sent out before the July 13th meeting.</i></p> |

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| | <ul style="list-style-type: none"> • There is an out-patient study going on. • There may be questions about why rotavirus vaccine is available again and why the 32 week age limit. • It is very important that providers, parents, and LHJs receive information from someone high up in DOH. • Develop a communications plan for the vaccine. • CDC does have a Q & A about rotavirus. • The information going out to providers should be sent to internists because of people living in the household with infants. • Hopefully, some of the concerns regarding household contacts will be addressed in the VIS. • Primary care doctors need to be aware that the vaccine won't be available until July 2007. • Since we won't get state funded vaccine for a while, the committee can send a strong message stating that this vaccine should be given. • Hopefully hospitalization costs avoided will be included in the HRSA conversation to pay for this vaccine. Pay now or pay later. • There is a two-tiered system in Washington State. Those who are insured will receive the vaccine, and those who are not insured will not receive it. • It would be good to give case family experiences to the Legislature. <p>Handouts:</p> <ul style="list-style-type: none"> • Outline Notes from Rotavirus Vaccine Presentation by Chas Debolt • ACIP VFC, Vaccines to Prevent Rotavirus Gastroenteritis Resolution No. 2/06-2 • VAC Rotavirus Vaccine Recommendation Discussion 4/27/06 | <p><i>DOH will develop a provider letter with information on the availability of the new vaccine through our universal system and to encourage vaccination with supporting rationale.</i></p> <p><i>Maxine asked Carolyn Coyne to share the costs of hospitalization of Medicaid infants at the HRSA meeting regarding this vaccine.</i></p> <p><i>Jan Hicks-Thomson will work with Neil Kaneshiro to collect case studies.</i></p> |
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| <p>VII. Horizon Vaccines</p> <p>Jan Hicks-Thomson</p> | <p>The Vaccine Recommendation Discussions: Tentative Timeline matrix was presented and discussed.</p> <p>Handouts: VAC Vaccine Recommendation Discussions: Tentative Timeline 4/2006</p> | |
| <p>VIII. Updates</p> <ul style="list-style-type: none"> • State Board of Health Advisory Group on School and Child Center Immunization Requirements • Workgroup to Develop Criteria for the Relative Public Health Value of Vaccine • Washington Chapter of the American Academy of Pediatrics Vaccine Summit • VMBIP • Influenza Vaccine pre-booking • Vaccine supply <p>Janna Bardi</p> | <p>At the April meeting, the State Board of Health (SBOH) agreed to adopt the report as an interim report and asked for further testing of the criteria. The criteria can be found on the SBOH website.</p> <p>DOH created a workgroup to develop criteria for the relative public health value of vaccines.</p> <p>Janna Bardi told VAC members about the Oregon and Washington Immunization Conference slated for May 15-16, 2007. Dr. Ed Marcuse and Dr. Bill Atkinson have been confirmed as guest speakers.</p> <p>Cynthia Shurtleff presented a new laminated immunization schedule provided by the Immunization Action Coalition of Washington. The cards can be downloaded at www.hmhb.org. If larger amounts are needed, Cynthia should be contacted.</p> <p>There will be a follow-up to the Vaccine Summit on May 17, 2006 from 9:00 A.M. until 11:30 A.M. at the Wright Auditorium at Children's Hospital in Seattle. There will be more focus on Medicaid reimbursement. It was hoped that Carolyn Coyne would be able to attend. Chris Olson will present.</p> <p>The date for implementation of the Vaccine Management business Improvement Project (VMBIP) is 10/2/06.</p> <p>In addition to the usual supply of flu vaccine, DOH pre-booked a preservative-free flu product from Chiron for</p> | <p><i>Cynthia Shurtleff will send information regarding the follow-up meeting on 5/17/06 to Vicki Bouvier for distribution to VAC members via the VAC ListServ.</i></p> |

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| | <p>pregnant adolescents.</p> <p>There have been no delays in shipping and the vaccine supply has normal availability.</p> <p>Comments from Committee Members:</p> <ul style="list-style-type: none"> • Guidance around giving Td or Tdap for children being treated in emergency rooms is needed because only one or the other can be given. • Interesting circumstances for giving Tdap, i.e., to women after they deliver and to grandparents who come to visit. • Maybe the guidance should be broader than ER use to include opportunities to vaccinate with Tdap. <p>Handouts: Immunization Policy Work, 4/06 Immunization Program Updates, 4/27/06</p> | |
| <p>IX. Visitors – Open Microphone</p> <p>Maxine Hayes</p> | <p>There were no comments.</p> | |
| <p>X. Next VAC Meeting</p> | <p>7/13/06 – Sea-Tac Marriott</p> | |